PTO/SB/17 (10-07)
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Under the Paperwork Reduc	HOLL MAK OF 199	o' ito heraou sie te	quireu to res	porte to a conectio				coniroi number.
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						plete if Known 10/531,329-Conf. #1359		
						September 16, 2005		
FEE TRANSMITTAL				iling Date		Satoshi HIRANUMA		
For FY 2008				irst Named Inv		D. T. Tran		
Applicant claims small entity status. See 37 CFR 1.27					3748			
				4575.04			EDITO4	
TOTAL AMOUNT OF PAYMENT (\$) 930.00			P	Attorney Docket No. 1575-0155Pt			51	
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch,								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILIN	IG FEES Small Entity	SEAR	RCH FEES Small Entity	EXAMIN	ATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees F	aid (\$)
Utility	310	155	510	255	210	105		
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description Each claim over 20 (including Reissues)							Fee (\$) 50	Fee (\$) 25
Each independent claim over 3 (including Reissucs)							210	105
Multiple dependent claims							370	185
Total Claims				d (\$)	<u>Mu</u>	ltiple Depende	nt Claims	
x =					Fee	<u>: (\$)</u>	ee Paid (\$	1
HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
Indep. Claims Extra Claims Fee (\$) Fee P				a (\$)				
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S)  Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 1251 Extension for response within first month							810.00 120.00	
SUBMITTED BY								
Signature		Sixonalia		egistration No. tomey/Agent)	29,271	Telephone	(703) 20	5-8000
Name (Print/Type) Charles Gorenstein Date							October 26, 2007	
<i>†</i> ~								